Case 16-31474 Doc 1 Filed 10/01/16 Entered 10/01/16 14:45:59 Desc Main Document Page 1 of 52

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	Al	bout Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's	Tony First name Eric	Fi	irst name
	license or passport).	Middle name	Mi	liddle name
	Bring your picture identification to your meeting with the trustee.	Garcia Last name and Suffix (Sr., Jr., II, III)	La	ast name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4068		

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Debtor 1 Tony Eric Garcia

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		4027 N Drake Apt 1 Chicago, IL 60618 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Tony Eric Garcia

_	The change of	0'		2.6.1	and and the second second second	441100000000000000000000000000000000000	_	
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Chapter 7						
		□с	hapter 11					
		□с	hapter 12					
		o c	hapter 13					
3.	How you will pay the fee	•	about how yo	u may pay. Ty attorney is sub	pically, if you are paying the fee yo	with the clerk's office in your local court for more detaurself, you may pay with cash, cashier's check, or more laft, your attorney may pay with a credit card or check w	ney	
					stallments. If you choose this option of the control of the contro	n, sign and attach the Application for Individuals to Pa	У	
			I request that but is not req	t my fee be w uired to, waive	raived (You may request this option your fee, and may do so only if you	only if you are filing for Chapter 7. By law, a judge mur income is less than 150% of the official poverty line	that	
						installments). If you choose this option, you must fill of ial Form 103B) and file it with your petition.	ut	
) .	Have you filed for bankruptcy within the	■ No).					
	last 8 years?	□ Ye	es.					
			District			Case number		
			District		When	Case number		
			District		When	Case number		
0.	Are any bankruptcy cases pending or being	■ No)					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
1.	Do you rent your residence?	■ No	Go to l	ne 12.				
		□ Ye	es. Has yo	ur landlord ob	tained an eviction judgment agains	t you and do you want to stay in your residence?		
				No. Go to line	2 12.			
				Yes. Fill out Inbankruptcy pe		ludgment Against You (Form 101A) and file it with this		

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Desc Main Document Page 4 of 52 Case number (if known) Debtor 1 Tony Eric Garcia Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes.

alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Tony Eric Garcia Debtor 1

Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) **Tony Eric Garcia** Debtor 1 **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. □ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Tony Eric Garcia Signature of Debtor 2 **Tony Eric Garcia** Signature of Debtor 1 Executed on October 1, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 Tony Eric Garcia Document Page 7 of 52 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Guillermo F. Martinez & Associates	Date	October 1, 2016
Signature of Attorney for Debtor	_	MM / DD / YYYY
Guillermo F. Martinez & Associates		
Printed name		
Guillermo F. Martinez & Associates		
Firm name		
2457 N. Milwaukee Avenue		
Chicago, IL 60647		
Number, Street, City, State & ZIP Code		
Contact phone 773-278-7777	Email address	beabt55@yahoo.com
Bar number & State		

		Docume	<u>eni Pade 8 0152</u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Tony Eric Garcia			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
if known)				☐ Check if this is ar amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	11,655.42
	1c. Copy line 63, Total of all property on Schedule A/B	\$	11,655.42
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	12,254.42
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	25,342.14
	Your total liabilities	\$	37,596.56
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,815.66
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,815.66
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Page 9 of 52 Case number (if known) Debtor 1 Tony Eric Garcia

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11: OR . Form 122B Line 11: OR . Form 122C-1 Line 14.

2,843.19

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cla	aim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

			Document	Page 10 of 52		
Fill in	this inform	nation to identify your	case and this filing:			
Debto	or 1	Tony Eric Garcia	Middle Name	Last Name		
Debto	or 2	i iist ivaille	Middle Name	Lastinanie		
	e, if filing)	First Name	Middle Name	Last Name		
United	d States Bar	nkruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS		
Cooo	n.,mh.o.r					7
Case	number _				L	☐ Check if this is an amended filing
						g
Ott:	sial Fa	rm 1061/D				
		rm 106A/B	4			
Sci	nedule	e A/B: Prop	perty			12/15
think it	fits best. Be	as complete and accura	pe items. List an asset only once. ate as possible. If two married pe n a separate sheet to this form. O	eople are filing together, both	are equally responsible for sup	plying correct
Answe	r every quest	tion.	·			, ,
Part 1	Describe I	Each Residence, Buildin	g, Land, or Other Real Estate You	ı Own or Have an Interest In		
1 Do v	vou own or h	ave any legal or equitable	le interest in any residence, build	ling, land, or similar property?	?	
	, ou o o	avo any logar or oquitable	o intoroot in any rootaonoo, bana	ing, land, or online property.	•	
	No. Go to Part					
	es. Where is	the property?				
Part 2	: Describe	Your Vehicles				
			uitable interest in any vehicle de, also report it on Schedule G			nicles you own that
		•		,		
3. Cai	rs, vans, tru	icks, tractors, sport u	tility vehicles, motorcycles			
□ N	No					
	res .					
3.1	_	Hyundai 	Who has an interest i	n the property? Check one	Do not deduct secured clai the amount of any secured	claims on Schedule D:
		Elantra	Debtor 1 only		Creditors Who Have Claim	s Secured by Property.
	Year: 2 Approximate	2012	Debtor 2 only Debtor 1 and Debtor	Oh.	Current value of the entire property?	Current value of the portion you own?
	Other inform		Debtor 1 and Debtor At least one of the o	•	entile property:	portion you own:
				abblete and another		
			Check if this is co	mmunity property	\$6,969.00	\$6,969.00
			(see instructions)			
			ATVs and other recreational values on all watercraft, fishing vessels			
	p.00. 20at	ο, παιιστο, πιστοτο, μοτο	ional materoran, norming record	,, 00	200000000	
	No					
	⁄es					
5 A al	ما الم ما الم	r value of the montion	vou own for all of vour ontrio	oo from Dart 2. including a	ny antrios for	
			you own for all of your entrie . Write that number here			\$6,969.00
Part 3	Describe \	Your Personal and Hous	sehold Items			
Do yo	ou own or h	ave any legal or equi	table interest in any of the fol	lowing items?		urrent value of the
						ortion you own? o not deduct secured
е Це	ueobold as	ade and furnishings			cla	aims or exemptions.
		ods and furnishings jor appliances, furniture	e, linens, china, kitchenware			

Official Form 106A/B Schedule A/B: Property

□ No

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Debtor 1	Tony Eric Garcia		Document	Page 11 of 52 Case numbe	r (if known)	
Yes.	Describe					
			chair, one small tans of home furnish	able, lamp, table with chairs, lings		\$350.00
□ No				oment; computers, printers, scanne	rs; music c	ollections; electronic devices
	cell ph	one				\$300.00
Exampl	bles of value les: Antiques and figurines; other collections, memo			oks, pictures, or other art objects; s	tamp, coin,	or baseball card collections;
Example No	ent for sports and hobbie les: Sports, photographic, e musical instruments Describe		ner hobby equipment; I	oicycles, pool tables, golf clubs, ski	s; canoes a	and kayaks; carpentry tools;
■ No	ns oles: Pistols, rifles, shotgun Describe	s, ammunition, a	and related equipment			
□ No ´	s bles: Everyday clothes, furs Describe	s, leather coats,	designer wear, shoes,	accessories		
	clothes	s and person	al effects			\$250.00
■ No □ Yes. 13. Non-fa Examp ■ No □ Yes.	Dies: Everyday jewelry, cos Describe rm animals bles: Dogs, cats, birds, hors Describe	ses		ding rings, heirloom jewelry, watche		jold, silver
■ No	Give specific information	-	uid not aiready list, ir	ncluding any health aids you did	not list	
	the dollar value of all of your art 3. Write that number h			ny entries for pages you have att	ached	\$900.00
	scribe Your Financial Assets		Almania af the fell	in and		Command welves of the
Do you ov	vn or have any legal or ec	quitable interes	t in any of the follow	ing ?		Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 2

D	obtor 1	Case 16		Doc 1	Filed 10/01/16 Document	Page 12 of 52	Desc Main
D	ebtor 1	Tony Eric	Garcia			Case number (if known)	
16.	□ No É	,,	·		our home, in a safe depo	osit box, and on hand when you file your petiti	on
						Cash	\$50.00
					al accounts; certificates counts with the same ins	of deposit; shares in credit unions, brokerage l titution, list each.	nouses, and other similar
	Yes				Institution r	name:	
			17.1.		landlord	deposit	\$500.00
			17.2.	checking	chase ch	ecking account	\$7.33
18.		mutual funds les: Bond fund			cks ith brokerage firms, mor	ney market accounts	
	☐ Yes		I	nstitution or is	ssuer name:		
19.	joint ve		stock and in	nterests in in	corporated and uninc	orporated businesses, including an interes	t in an LLC, partnership, and
	■ No	Civo aposifio i	nformation a	hout thom			
	□ res.	Give specific i		e of entity:		% of ownership:	
20.	Negotia	able instrumen	ts include pe	rsonal check		egotiable instruments missory notes, and money orders. by signing or delivering them.	
	☐ Yes. (Give specific ir		oout them er name:			
21.		nent or pension les: Interests i			1(k), 403(b), thrift saving	s accounts, or other pension or profit-sharing	plans
	Yes. I	ist each acco		ly. account:	Institution r	name:	
			401K	olan	401K plar	n with employer	\$3,229.09
			•				
22.	Your sh		sed deposits	you have ma		tinue service or use from a company ctric, gas, water), telecommunications compar	nies, or others
	_				Institution r	name or individual:	
23.		es (A contract	for a periodi	c payment of	money to you, either for	r life or for a number of years)	
	■ No □ Yes		Issuer name	and descript	ion.		
2.4				·			
24.	26 U.S.C	s in an educa C. §§ 530(b)(1)				ogram, or under a qualified state tuition pro	ogram.
	■ No □ Yes		Institution na	ime and desc	cription. Separately file th	ne records of any interests.11 U.S.C. § 521(c)	:

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1	Tony Eric Garcia	Document	Page 13 of 52 Case number (if k	nown)
25.		equitable or future interests in property	(other than anythin	g listed in line 1), and rights or powe	rs exercisable for your benefit
	■ No □ Yes.	Give specific information about them			
26.	Examp ■ No	s, copyrights, trademarks, trade secrets, les: Internet domain names, websites, prod			
	☐ Yes.	Give specific information about them			
27.		es, franchises, and other general intangi les: Building permits, exclusive licenses, co		holdings, liquor licenses, professional	licenses
	☐ Yes.	Give specific information about them			
M	oney or p	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you			
	■ No □ Yes. 0	Give specific information about them, include	ding whether you alre	ady filed the returns and the tax years	
29.	■ No	support les: Past due or lump sum alimony, spousa Give specific information	al support, child suppo	rt, maintenance, divorce settlement, pr	operty settlement
30.	Examp ■ No	Imounts someone owes you Ides: Unpaid wages, disability insurance pay benefits; unpaid loans you made to so Give specific information		efits, sick pay, vacation pay, workers' c	compensation, Social Security
31.	Interest Examp	ts in insurance policies les: Health, disability, or life insurance; hea	ılth savings account (l	HSA); credit, homeowner's, or renter's i	nsurance
	■ No	Name that income a common of a calculation	and list its		
	⊔ Yes. I	Name the insurance company of each polic Company name:	ey and list its value.	Beneficiary:	Surrender or refund value:
32.	If you a someon	erest in property that is due you from so are the beneficiary of a living trust, expect p ne has died.			to receive property because
	⊔ Yes.	Give specific information			
33.		against third parties, whether or not you les: Accidents, employment disputes, insur			
	☐ Yes.	Describe each claim			
34.	■ No	contingent and unliquidated claims of ev	ery nature, including	g counterclaims of the debtor and rig	ghts to set off claims
25	Any fire	ancial accore you did not already list			
35.	■ No	ancial assets you did not already list Give specific information			
	∟ 1€5.	Oive specific inititination			

Official Form 106A/B Schedule A/B: Property page 4

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Deb	tor 1 T	ony Eric Garcia		Case number (if known)	
36.		dollar value of all of your entries from Part 4, includir 1. Write that number here		es you have attached	\$3,786.42
Part	5: Descri	be Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	ite in Part 1.	
87. D	o you own	or have any legal or equitable interest in any business-related	ted property?		
	No. Go to I	Part 6.			
	Yes. Go to	p line 38.			
Part		be Any Farm- and Commercial Fishing-Related Property You wn or have an interest in farmland, list it in Part 1.	ມ Own or Have an Interes	st In.	
16. [Do you ov	vn or have any legal or equitable interest in any farm	or commercial fishir	g-related property?	
	No. Go	to Part 7.			
	☐ Yes. G	o to line 47.			
Part	7· D	escribe All Property You Own or Have an Interest in That Yo	u Did Not List Ahove		
		· •			
		ve other property of any kind you did not already list : Season tickets, country club membership	:?		
	Lxampico I No	. Goddon tioketo, oddritry oldo memberenip			
		e specific information			
54.	Add the	dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
Part	8: Lis	t the Totals of Each Part of this Form			
55.	Part 1: T	otal real estate, line 2			\$0.00
56.	Part 2: T	otal vehicles, line 5	\$6,969.00	_	•
57.	Part 3: T	otal personal and household items, line 15	\$900.00		
58.	Part 4: T	otal financial assets, line 36	\$3,786.42		
59.	Part 5: T	otal business-related property, line 45	\$0.00		
60.	Part 6: T	otal farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: T	otal other property not listed, line 54	\$0.00		
62.	Total per	sonal property. Add lines 56 through 61	\$11,655.42	Copy personal property total	\$11,655.42

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$11,655.42

Fill in this infor	mation to identify your	case:		
Debtor 1	Tony Eric Garcia			
Debior 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the l	Property	You	Claim	as	Exemp
I all I.	IUCIIIIV	เมเซา	IODEILV	ı ou	Ciaiiii	aэ	LVCIIID

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	current value of the portion you own Copy the value from Schedule A/B	Check only one box for each exemption.	Specific laws that allow exemption	
1 tv set, bed, chest, chair, one small table, lamp, table with chairs, and other small items of home furnishings Line from Schedule A/B: 6.1	\$350.00	\$350.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	
cell phone Line from Schedule A/B: 7.1	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	
clothes and personal effects Line from Schedule A/B: 11.1	\$250.00	\$250.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)	
Cash Line from Schedule A/B: 16.1	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	
landlord deposit Line from Schedule A/B: 17.1	\$500.00	\$500.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	

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Case number (if known)

Brief description of the property and line on Current value of the Amount of the exemption you claim.

Specific laws that allow exemption you claim.

Brief description of the property and lin Schedule A/B that lists this property	e on Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check only one box for each exemption.		
checking: chase checking according from Schedule A/B: 17.2	ount \$7.33	\$7.33	735 ILCS 5/12-1001(b)	
Line Horr Schedule A/B. 11.2		100% of fair market value, up to any applicable statutory limit		
401K plan: 401K plan with emp	loyer \$3,229.09	\$3,229.09	735 ILCS 5/12-1006	
Line Horr Schedule Arb. 21.1		100% of fair market value, up to any applicable statutory limit		
Are you claiming a homestead exer (Subject to adjustment on 4/01/19 and	•	5? ses filed on or after the date of adjustme	nt.)	

☐ Yes

Ca	ase 16-31474	Doc 1 Filed 10/01/16 Document	Entered Page 17 d	10/01/16 14:4	45:59 Desc N	ıaın
Fill in this infor	mation to identify you		Paue 17 (11 32		
Debtor 1						
Debior 1	Tony Eric Garcia First Name		Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF ILLIN	NOIS			
Case number						
(if known)					☐ Check	if this is an
					amend	ded filing
Official Forr	m 106D					
		Who House Claims S	`aauraal	h. Dranart		40/45
Schedule	D: Creditors	Who Have Claims S	ecurea	by Property	у	12/15
s needed, copy th	e Additional Page, fill it o	f two married people are filing together ut, number the entries, and attach it to				
number (if known)						
`	s have claims secured by					
_		is form to the court with your other se	chedules. You	have nothing else to	o report on this form.	
Yes. Fill in	n all of the information b	pelow.				
Part 1: List A	II Secured Claims					
		nore than one secured claim, list the credit		Column A	Column B	Column C
		a particular claim, list the other creditors in all order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Capital O	ne Auto Finance	Describe the property that secures the	e claim:	\$12,254.42	\$6,969.00	\$5,285.42
Creditor's Nam	ne	2012 Hyundai Elantra 53,000 ı	miles			
P.O. Box	60511	As of the date you file, the claim is: Ch	heck all that			
	IL 60634-2512	apply. Contingent				
	t, City, State & Zip Code	☐ Unliquidated				
,	, , , , , , , , , , , , , , , , , , , ,	☐ Disputed				
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mo	ortgage or secure	ed		
Debtor 2 only		car loan)				
Debtor 1 and D	ebtor 2 only	☐ Statutory lien (such as tax lien, mech	nanic's lien)			
☐ At least one of	the debtors and another	☐ Judgment lien from a lawsuit				
Check if this c		Other (including a right to offset)	car Ioan			
Date debt was inc	ourred 01/2015	Last 4 digits of account numbe	er <u>0203</u>			
Add the dollar v	ralue of your entries in Co	olumn A on this page. Write that number	er here:	\$12,25	4.42	
If this is the last	t page of your form, add t	he dollar value totals from all pages.		\$12,25		
Write that numb	er nere:			Ψ. =,=0	-	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	0430 10 01414	Document	Page 1	3 of 52	<i>5</i>	viairi
Fill in this in	formation to identify your					
Debtor 1	Tony Eric Garcia					
DODIOI 1	First Name	Middle Name	Last Name	_		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLI	INOIS			
Case number						
(if known)	-				☐ Chec	k if this is an
					amer	ded filing
o#: =	4005/5					
	orm 106E/F					
Schedule	E/F: Creditors W	ho Have Unsecured (Claims			12/15
Schedule D: Cr left. Attach the name and case	editors Who Have Claims Sec Continuation Page to this pag number (if known).	ired Leases (Official Form 106G). Do ured by Property. If more space is n e. If you have no information to repo	eeded, copy t	he Part you need, fill it out, nur	mber the entries	in the boxes on the
Part 1: Lis	st All of Your PRIORITY Un	secured Claims				
1. Do any cre	editors have priority unsecure	d claims against you?				
No. Go	to Part 2.					
☐ Yes.						
Part 2: Lis	st All of Your NONPRIORIT	Y Unsecured Claims				
3. Do any cre	editors have nonpriority unsec	ured claims against you?				
☐ No. You	u have nothing to report in this pa	art. Submit this form to the court with y	our other sche	edules.		
Yes.						
4. List all of unsecured	claim, list the creditor separately	aims in the alphabetical order of the of for each claim. For each claim listed, st the other creditors in Part 3.If you ha	identify what t	ype of claim it is. Do not list claim	is already include	d in Part 1. If more
					То	tal claim
4.1 Allie	dinterstate	Last 4 digits of acco	unt number	2062		\$681.00
•	iority Creditor's Name					·
	Box 361445	When was the debt i	ncurred?	02-10-2012		
	imbus, OH 43236 er Street City State ZIp Code	As of the date you fi	le. the claim i	s: Check all that apply		
	ncurred the debt? Check one.					
■ De	ebtor 1 only	☐ Contingent				
☐ De	ebtor 2 only	☐ Unliquidated				
□ De	ebtor 1 and Debtor 2 only	☐ Disputed				
☐ At	least one of the debtors and and	- (11011001001	TY unsecured	l claim:		
□сн	neck if this claim is for a comr	nunity				
debt		☐ Obligations arising		ration agreement or divorce that	you did not	
_	claim subject to offset?	report as priority claim				
■ No)			g plans, and other similar debts		
☐ Ye	S	Other. Specify	redit Card	<u> </u>		

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Debtor 1 Tony Eric Garcia Case number (if know) 4.2 \$1,164.00 American Air/CBNA c/o United Last 4 digits of account number 9166 Nonpriority Creditor's Name Recovery Systems, LP When was the debt incurred? 02-12-2011 P.O.Box 722910 Houston, TX 77272-2910 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.3 Armor Systems Corp c/o Medical-Last 4 digits of account number \$100.00 5128 Nonpriority Creditor's Name Swedish Covenant Hospital When was the debt incurred? Since 02-2013 1700 Kiefer Dr Ste 1 Zion, IL 60099 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Collection Agency / Attorney** 4.4 Armor Systems Corporation c/o \$100.35 Last 4 digits of account number 5128 Nonpriority Creditor's Name **Swedish Covenant Hospital** When was the debt incurred? **Since 2013** 1700 Kiefer Drive Suite 1 Zion, IL 60099-5105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Services ☐ Yes

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Debtor 1 Tony Eric Garcia Case number (if know) 4.5 \$2,280.59 **Capital One** Last 4 digits of account number 4936 Nonpriority Creditor's Name P.O.Box 6492 When was the debt incurred? Since 02-2015 Carol Stream, IL 60197-6492 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes Discover Fincl SVC LLC c/o 9944 \$6.855.10 4.6 **Attorney** Last 4 digits of account number Nonpriority Creditor's Name Blitt and Gaines, P.C. When was the debt incurred? 11-19-2008 661 Glenn Ave Wheeling, IL 60090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other. Specify 4.7 Estate Information Services ,LLCc/o 9989 \$2,499.78 Last 4 digits of account number Nonpriority Creditor's Name Citi AA World Mastercard When was the debt incurred? **Since 2011** P.O.Box 1730 Reynoldsburg, OH 43068-8730 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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Case number (if know)

Debioi	Tony Enc Garcia		Case number (ii know)	
4.8	Greensboro Services Center c/o	Last 4 digits of account number	1006	\$438.03
	Nonpriority Creditor's Name Medstar Laboratory P.O. Box 981502	When was the debt incurred?	02-17-2012	
	El Paso, TX 79998-1502			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical Se	rvices	
.9	Merchants Credit Guide c/o Medical	Last 4 digits of account number	5188	\$64.00
	Nonpriority Creditor's Name Midwest Imaging Professionals	When was the debt incurred?	02-26-2015	
	223 Jackson Blvd Suite 700		01 10 10 10	
	Chicago, IL 60606			
	As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.		is: Check all that apply	
	Debtor 1 only	П о		
	Debtor 2 only	☐ Contingent ☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	·	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Collection	Agency / Attorney	
.1	midwest Imagining Professionals	Last 4 digits of account number	1152	\$64.65
	Nonpriority Creditor's Name	Last 4 digits of account number		40.1100
	P.O.Box 3223831	When was the debt incurred?	02-26-2015	
	Pittsburgh, PA 15250-7863 Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam	S. Olleck all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No No	Debts to pension or profit-sharir		
	Yes	Other. Specify Medical Se	rvices	

Document Page 22 of 52 Debtor 1 Tony Eric Garcia Case number (if know) MRS BPO,L.L.C. c/o Credit One 4.1 6062 \$943.63 Last 4 digits of account number **Bank** Nonpriority Creditor's Name 1930 Olney Ave. When was the debt incurred? 08-29-2014 Cherry Hill, NJ 08003 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 \$755.00 MRS Associates of New Jersey c/o 6765 Last 4 digits of account number Nonpriority Creditor's Name **Chase Bank One Card Serv** When was the debt incurred? 01-22-2014 1930 Olney Ave Cherry Hill, NJ 08003 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.1 MRS Associates of New York c/o 2249 \$2,514.00 Last 4 digits of account number Nonpriority Creditor's Name **Chase Bank One Card Serv** When was the debt incurred? 01-29-2014 Cherry Hill, NJ 08003 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card

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Debtor 1 Tony Eric Garcia Case number (if know) 4.1 **Presence Health** 1152 \$1,228.02 Last 4 digits of account number 4 Nonpriority Creditor's Name 62392 Collection Center Dr When was the debt incurred? 02-26-2015 Chicago, IL 60693-0623 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Services ☐ Yes 4.1 **Presence Saint Joseph Hospital** 1152 \$1,228.02 Last 4 digits of account number 5 Nonpriority Creditor's Name 62392 Collection Center Dr When was the debt incurred? 02-24-2015 Chicago, IL 60693-0623 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Services ☐ Yes 4.1 **Quest Diagnostics** 5190 \$2.80 Last 4 digits of account number 6 Nonpriority Creditor's Name P.O. Box 7306 When was the debt incurred? 04-19-2016 Hollister, MO 65673-7306 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Services ☐ Yes

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Quest Diagnostics	Last 4 digits of account number 5204	\$4
Nonpriority Creditor's Name P.O.Box 7306	When was the debt incurred? 04-19-2016	
Hollister, MO 65673-7306 Number Street City State Zlp Code	As of the date you file the claim is: Check all that each	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Services	_
Quest Diagnostics	Last 4 digits of account number 5216	\$
Nonpriority Creditor's Name P.O.Box 7306	When was the debt incurred? 04-19-2016	
Hollister, MO 65673-7306 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Offect all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Medical Services	_
Bassinghia	4020	
Receivables management ,Inc c/o Nonpriority Creditor's Name	Last 4 digits of account number 4936	\$2,32
Capital One Bank ,N.A. 4850 Street Rd, Suite 300	When was the debt incurred? 07-29-1998	_
Feasterville Trevose, PA 19053	_	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	

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Debtor 1 Tony Eric Garcia Case number (if know) 4.2 **Roque Ponton Medical Group** 0932 \$46.22 Last 4 digits of account number 0 Nonpriority Creditor's Name 2740 W Foster Ave Suite 313 When was the debt incurred? 04-19-2016 Chicago, IL 60625-3524 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Services ☐ Yes 4.2 SCH Laboratory Physicians, SC 4927 \$5.40 Last 4 digits of account number Nonpriority Creditor's Name Department 4353 When was the debt incurred? 02-11-2015 Carol Stream, IL 60122-4353 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Services ☐ Yes 4.2 Syncb/Tix Co PLCC 2062 \$765.50 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 965015 When was the debt incurred? 02-10-2012 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

Debto	or 1 Tony Eric Garcia	Document	Page 26 of 52 Case number (if know)	
4.2	United Recovery Systems c/o	Last 4 digits of acco	ount number 9116	\$1,105.6

United Recovery Systems c/o	Last 4 digits of account number	9116	\$1,105.64
Nonpriority Creditor's Name Citibank , N.A. American Airlines P.O. Box 722910	When was the debt incurred?	02-12-2011	
Houston, TX 77272-2910 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Uropartners	Last 4 digits of account number	8990	\$125.05
Nonpriority Creditor's Name 3183 Paysphere Circle Chicago, IL 60674-0031	When was the debt incurred?	04-04-16 / 02-23-2016	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	_		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00

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Debtor 1 Tony Eric Garcia

6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 25,342.14
6i	Total Nonpriority. Add lines 6f through 6i	6i	\$ 25 342 14

			H I WAY: EU WI UE	
Fill in this infor	mation to identify your	case:		
Debtor 1	Tony Eric Garcia			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check
				amende

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the cor, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
2.1					
	Name				_
					<u></u>
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	N	01 1			_
	Number	Street			
	0.1		0	710.0	_
	City		State	ZIP Code	
2.3					_
	Name				
	Number	Street			_
	ramboi	Olioot			
	City		State	ZIP Code	_
2.4	J.,		- Clare	2 0000	
2.7	Name				_
	Ivallie				
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Ctroot			_
	ivumber	Street			
	City		State	ZIP Code	<u> </u>
	City		State	ZIP Code	

		Docume	ent Page 29 o	of 52	
Fill in thi	s information to identify you	ır case:			
Debtor 1	Tomy Frie Corei				
Debioi i	Tony Eric Garci	Middle Name	Last Name		
Debtor 2					
(Spouse if, fi	iling) First Name	Middle Name	Last Name	_	
United St	ates Bankruptcy Court for the:	: NORTHERN DISTRICT	OF ILLINOIS		
	• ,				
Case nur	mber				— O. 1.7.1
(II KIIOWII)					Check if this is an amended filing
					amended ming
Officia	al Form 106H				
	dule H: Your Co	dobtors			40/45
Scrie	dule n. Tour Co	ueblois			12/15
1. Do		, , ,		e as a codebtor.	
☐ Ye	es				
Arizo	ithin the last 8 years, have young, California, Idaho, Louisian b. Go to line 3. cs. Did your spouse, former sp	na, Nevada, New Mexico, Pu	erto Rico, Texas, Wash		states and territories include
in lin Form	ne 2 again as a codebtor only in 106D), Schedule E/F (Offici Column 2. **Column 1: Your codebtor**	y if that person is a guaran ial Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed the OGG). Use Schedule D, S	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt
	Name, Number, Street, City, State and	I ZIP Code		Check all schedules	s that apply:
3.1				☐ Schedule D, line	
3.1	Name			Schedule E/F, line	
				☐ Schedule G, line	
				— Scriedale O, line	
	Number Street City	State	ZIP Code		
	City	Sidle	ZIF Code		
				_	
3.2				Schedule D, line	
	Name			☐ Schedule E/F, lir	
				☐ Schedule G, line	·
	Number Street			_	
	City	State	ZIP Code		

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Eill	in this information to identify yo	our gago:								
		ic Garcia								
	otor 2				_					
	ted States Bankruptcy Court fo	or the: NORTHERN DISTRIC	CT OF ILLINOIS							
(If kr	se number nown)		-				mended to	J	estpetition cha	apter
	fficial Form 106l					MM /	DD/ YY	YY		
Be a sup spo atta	chedule I: Your I as complete and accurate as plying correct information. If use. If you are separated and ch a separate sheet to this fo t1: Describe Employm	possible. If two married pec you are married and not fili I your spouse is not filing w orm. On the top of any additi	ng jointly, and your s ith you, do not includ	spouse i de inforr	s liv nati	ring with yoເ on about yo	ı, includ ur spous	le informationse. If more s	on about you space is nee	ur eded,
1.	Fill in your employment information.		Debtor 1			De	btor 2 o	or non-filing	spouse	
	If you have more than one jo	b,	■ Employed				Employe			
	attach a separate page with information about additional employers.	Employment status	☐ Not employed				Not emp	ployed		
		Occupation	warehouse delivery driver World Pac inc.							
	Include part-time, seasonal, of self-employed work.	Employer's name								
	Occupation may include stude or homemaker, if it applies.	lent Employer's address	6605 W. Montros Chicago, IL 6070							
		How long employed t	here? 10							_
Par	t 2: Give Details About	Monthly Income								
	mate monthly income as of t use unless you are separated.	he date you file this form. If	you have nothing to re	eport for	any	line, write \$0	in the sp	pace. Include	your non-fili	ing
	u or your non-filing spouse have space, attach a separate she		ombine the information	n for all e	mpl	oyers for that	person	on the lines	below. If you	need
						For Debtor		For Debtor non-filing s		
2.		salary, and commissions (b thly, calculate what the monthly		2.	\$	2,580	6.78	\$	N/A	
3.	Estimate and list monthly of	overtime pay.		3.	+\$		0.00	+\$	N/A	

2,586.78

N/A

Calculate gross Income. Add line 2 + line 3.

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Debt	tor 1	Tony Eric Garcia	-	(Case r	number (if kr	nown)				
					For	Debtor 1			Debtor		
	Cop	by line 4 here	4.		\$	2,586	5.78	\$		N/A	<u> </u>
5.	l ist	all payroll deductions:									
J.	5a.	Tax, Medicare, and Social Security deductions	5a	3	\$	400	3.68	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5k		\$ —		0.00	\$ -		N/A	
	5c.	Voluntary contributions for retirement plans	50		\$_		3.21	\$_		N/A	
	5d.	Required repayments of retirement fund loans	50		\$.42	\$		N/A	_
	5e.	Insurance	5€		\$.81	\$_		N/A	_
	5f.	Domestic support obligations	5f		\$		0.00	\$_		N/A	
	5g.	Union dues	50	g.	\$	C	0.00	\$		N/A	<u>\</u>
	5h.	Other deductions. Specify:	_ 5h	า.+	\$	C	0.00	+ \$_		N/A	<u>\</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	771	.12	\$_		N/A	<u>\</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,815	5.66	\$		N/A	<u>\</u>
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a.	\$	C	0.00	\$		N/A	
	8b.	Interest and dividends	8b		\$		0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	с.	\$	C	0.00	\$_		N/A	
	8d.	Unemployment compensation	80	d.	\$	C	0.00	\$		N/A	<u>\</u>
	8e.	Social Security	86	Э.	\$	C	0.00	\$		N/A	<u> </u>
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	e 8f 8g		\$		0.00 0.00	\$_ \$		N/A N/A	
	8h.	Other menthly income Consider	_	y. า.+	\$ -		0.00			N/A	
	OII.	Other monthly income. Specify:	_ "		Ψ_		.00	'		19/74	<u>`</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.			C	0.00	\$_		N/	Ά
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	-	1,815.66	+ \$		N/A	= \$	1,815.66
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ-		1,013.00	. _		IVA		1,013.00
11.	Star Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	dep					-		e <i>J</i> . +\$	0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certaillies							12.	\$	1,815.66
13.	Do	you expect an increase or decrease within the year after you file this form	?							Combi month	ined Ily income
		No.									
		Voc Evoloin:									

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						i		
Filli	in this informa	tion to identify yo	our case:					
Debt	tor 1	Tony Eric Ga	arcia				k if this is:	
Debt	tor 2					_	An amended filing A supplement show	wing postpetition chapter
1	ouse, if filing)					_		the following date:
Unite	ed States Bankr	uptcy Court for the:	: NORTH	HERN DISTRICT OF ILLIN	OIS	Ī	MM / DD / YYYY	
	e number nown)							
Of	ficial Fo	rm 106J				•		
		J: Your I	Exper	ises				12/15
Be a	as complete a ormation. If m	and accurate as	possible eded, atta	. If two married people and the contract in the contract is the contract to the contract in th				or supplying correct
Part		ibe Your House	hold					
1.	Is this a join							
	■ No. Go to		n a senar	ate household?				
	□ No. □ No.		a copa					
			st file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Debt	or 2.	
2.	Do you have	e dependents?	□ No					
	Do not list De Debtor 2.	Do not list Debtor 1 and Yes. Fill out this information for Dependent		Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?	
	Do not state	the						■ No
	dependents	names.			mother		57	Yes
								□ No □ Yes
					-			□ No
								☐ Yes
					-		· -	□ No
_	_							☐ Yes
3.		enses include f people other th	han _	No				
	•	d your depende		Yes				
exp	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
		e paid for with r	non-cash	govornment assistance i	f you know			
the		n assistance and		government assistance i cluded it on Schedule I: \			Your exp	enses
4.		r home owners		nses for your residence. I or lot.	nclude first mortgag	e 4. \$		500.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a. \$		0.00
	•	rty, homeowner's	-			4b. \$		0.00
				upkeep expenses		4c. \$		0.00
5		owner's associat		dominium dues our residence. such as ho	mo oquity loons	4d. \$ 5. \$		0.00

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ebtor 1 Ion	ny Eric Garcia	Case num	ber (if known)	
Utilities:				
	etricity, heat, natural gas	6a.	\$	0.00
	er, sewer, garbage collection	6b.		0.00
	ephone, cell phone, Internet, satellite, and cable services	6c.		70.00
	er. Specify:	6d.	·	0.00
	housekeeping supplies		\$	281.19
	and children's education costs	8.	\$	0.00
	laundry, and dry cleaning	9.	\$	80.00
-	care products and services	10.	\$	50.00
	nd dental expenses	11.	·	
	•	11.	Φ	10.00
	ation. Include gas, maintenance, bus or train fare. lude car payments.	12.	\$	100.00
	ment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	contributions and religious donations	14.	\$	0.00
. Insurance	•	17.	Ψ	0.00
	ude insurance deducted from your pay or included in lines 4 or 20.			
15a. Life	, , ,	15a.	\$	0.00
	Ith insurance	15b.		0.00
	icle insurance	15c.	·	60.00
	er insurance. Specify:	15d.	·	0.00
	not include taxes deducted from your pay or included in lines 4 or 20		–	0.00
Specify:	The mondae taxes deducted from your pay or included in illies 4 of 20	,. 16.	\$	0.00
	nt or lease payments:		* -	0.00
	payments for Vehicle 1	17a.	\$	264.47
	payments for Vehicle 2	17b.	\$	0.00
17c. Othe	• •	17c.	\$	0.00
17d. Othe		17d.	·	0.00
	nents of alimony, maintenance, and support that you did not rep			
deducted	from your pay on line 5, Schedule I, Your Income (Official Form		\$	300.00
Other pay	ments you make to support others who do not live with you.		\$	0.00
Specify: _		19.		
	property expenses not included in lines 4 or 5 of this form or or			
	tgages on other property	20a.		0.00
20b. Real	l estate taxes	20b.		0.00
	perty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Mair	ntenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Hom	neowner's association or condominium dues	20e.	\$	0.00
. Other: Spe	ecify: mother's expenses	21.	+\$	100.00
	your monthly expenses		•	4.045.00
	ines 4 through 21.	0010	\$	1,815.66
	line 22 (monthly expenses for Debtor 2), if any, from Official Form 10	J0J-2	\$	
22c. Add li	ne 22a and 22b. The result is your monthly expenses.		\$	1,815.66
. Calculate	your monthly net income.			
	y line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,815.66
	y your monthly expenses from line 22c above.	23b.		1,815.66
	· · · · · · · · · · · · · · · · · · ·	_3~.		1,010100
	tract your monthly expenses from your monthly income.		•	0.00
	result is your monthly net income.	23c.	\$	0.00
De ven en	most an increase or decrease in your expenses within the ware	ofter you file 4h!-	form?	
	spect an increase or decrease in your expenses within the year a			ease or decrease because o
	to the terms of your mortgage?	oo. your morigage p		and or additionable blockeds to
	, , , , , , , , , , , , , , , , , , , ,			
■ No.				

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Fill in this infor	mation to identify your	case:			
Debtor 1	Tony Eric Garcia				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					heck if this is an mended filing
You must file th obtaining mone years, or both. 1	is form whenever you fi y or property by fraud it I8 U.S.C. §§ 152, 1341, 1	le bankruptcy schedules n connection with a banl		rect information. . Making a false statement, conce n fines up to \$250,000, or impriso	
	n Below	ene who is NOT an etter	moute help you fill out h	on kuuntou forma?	
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petitic Declaration, and Signatu	
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	d with this declaration and	
X /s/ Tor	ny Eric Garcia		X		
Tony I	Éric Garcia		Signature of	Debtor 2	
Signatu	re of Debtor 1				
Date	October 1, 2016		Date		

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Fill in	this inform	ation to identify you	r case:			
Debto	or 1	Tony Eric Garcia	1			
		First Name	Middle Name	Last Name		
Debto (Spous	or 2 e if, filing)	First Name	Middle Name	Last Name		
		kruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Office	u States Dan	kruptcy Court for the.	NORTHERN DISTRICT	DI ILLINOIS		
Case (if know	number				_	theck if this is an mended filing
	cial For		Affairs for Indivi	duals Filing for B	ankruptcy	4/16
inform	nation. If mo er (if known)	ore space is needed, . Answer every que	attach a separate sheet to	this form. On the top of any	equally responsible for sup additional pages, write you	
		current marital statu				
	MarriedNot marr	ied				
2. D	uring the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No ■ Yes. List	all of the places you l	ived in the last 3 years. Do n	ot include where you live now		
1	Debtor 1 Price	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Mak	e sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explain	the Sources of You	r Income			
F	ill in the total	amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including partetogether, list it only once un		ndar years?
		n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$27,301.85	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Debtor 1 Tony Eric Garcia

For last calendar year: (lanuary 1 to December 31, 2015)				Debtor 1	Debtor 1			Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions) Sources of income Check all that apply.		Gross income (before deductions and exclusions)			
			31, 2015)	■ Wages, commissions, bonuses, tips	nmissions, \$35,582.00					
				☐ Operating a business		☐ Operating a	business			
				■ Wages, commissions, bonuses, tips	\$31,688.00	☐ Wages, combonuses, tips	☐ Wages, commissions, bonuses, tips			
				☐ Operating a business		☐ Operating a	business			
5.	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details.									
				Debtor 1		Debtor 2				
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)		
Par	rt 3: Lis	t Certain Pa	yments Yo	u Made Before You Filed for E	Bankruptcy					
6.	Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by a individual primarily for a personal, family, or household purpose."									
		During the	•	days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? to to line 7.						
		☐ Yes	List below paid that on not include	each creditor to whom you paid reditor. Do not include paymen e payments to an attorney for th	ts for domestic support obliquis bankruptcy case.	gations, such as ch	nild support a	and alimony. Also, do		
* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600							•			
		□ _{No.}	Go to line	7.						
	Yes List below each creditor to whom you paid a total of \$600 or more and the total amount include payments for domestic support obligations, such as child support and alimony. attorney for this bankruptcy case.									
	Creditor	's Name an	d Address	Dates of paymen	nt Total amount paid	Amount you still owe	Was this	payment for		
Capital One Auto Finance P.O. Box 60511				06-2016 07-2016	\$793.41	\$0.00	☐ Mortga ■ Car	ge		
	Chicago	o, IL 60634	I-2512	08-2016			☐ Credit (☐ Loan R			

☐ Suppliers or vendors

□ Other

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Case number (if known) Document Debtor 1 Tony Eric Garcia

7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any ger control, or owner of 20% of	neral partners; partners or more of their votin	erships of which yog g securities; and a	ou are a general any managing ag	partner; corporations ent, including one for
	■ No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	nis payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	account of a deb	ot that benefited an
	■ No□ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include creditor	
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. □ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	case
	Discover Bank vs. Tony E. Garcia 15M1 129944	Civil	First Municipal Cook County, 50 W. Washing Chicago, IL 60	l _J ton	■ Pending □ On appeal □ Concluded	
					judgment e	ntered
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below □ No. Go to line 11.		erty repossessed, f	oreclosed, garni	shed, attached,	seized, or levied?
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date	•	Value of the property
		Explain what happened	d			,
	Discover Fincl SVC LLC c/o	wages				\$156.84
	Attorney Blitt and Gaines,P.C. 661 Glenn Ave	☐ Property was reposse☐ Property was foreclos				
	Wheeling, IL 60090	■ Property was garnish	ed.			
		☐ Property was attache				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becomes No Yes. Fill in the details.		luding a bank or fi	nancial institution	n, set off any an	nounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date take	action was	Amount

		Case 16-31474 [Doc 1 F	iled 10/01/16 Document	Entered 10/01/2 Page 38 of 52	16 14:45:59 Desc	c Main
Deb	otor 1	Tony Eric Garcia		Document	Case nu	umber (if known)	
12.		nin 1 year before you filed for b rt-appointed receiver, a custod			perty in the possession	of an assignee for the ben	efit of creditors, a
		No Yes					
Par	t 5:	List Certain Gifts and Contril	butions				
13.	With	nin 2 years before you filed for	bankruptcy,	did you give any gi	fts with a total value of n	nore than \$600 per person	?
		No	.:11				
		Yes. Fill in the details for each gets with a total value of more that		Describe the gift	•	Dates you gave	Value
	per	person		Describe the girt	•	the gifts	value
		rson to Whom You Gave the Gi dress:	ift and				
14.	_	nin 2 years before you filed for	bankruptcy,	did you give any gi	fts or contributions with	a total value of more than	\$600 to any charity?
		No Yes. Fill in the details for each g	gift or contribu	tion.			
	mo Cha	ts or contributions to charities re than \$600 arity's Name		Describe what yo	ou contributed	Dates you contributed	Value
Par		dress (Number, Street, City, State and 2 List Certain Losses	ZIP Code)				
rai	ι ο.	List Certain Losses					
15.		nin 1 year before you filed for b ambling?	oankruptcy o	r since you filed for	bankruptcy, did you los	e anything because of the	ft, fire, other disaster,
		No					
		Yes. Fill in the details.					
		scribe the property you lost an w the loss occurred	Includ	e the amount that ins	coverage for the loss surance has paid. List pen of Schedule A/B: Propen		Value of property lost
Par	t 7:	List Certain Payments or Tra	insfers				
16.	con	nin 1 year before you filed for b sulted about seeking bankrupt ude any attorneys, bankruptcy pe	cy or prepari	ing a bankruptcy pe	tition?		rty to anyone you
		No					
		Yes. Fill in the details.					
	Add	rson Who Was Paid dress ail or website address rson Who Made the Payment, if	f Not You	Description and transferred	value of any property	Date payment or transfer was made	Amount of payment
	Gu 24	illermo F. Martinez 57 N. Milwaukee icago, IL 60647				07-2016	\$600.00
17.	pro	nin 1 year before you filed for b mised to help you deal with you not include any payment or transf	ur creditors o	or to make payment		f pay or transfer any prope	rty to anyone who
		No					
		Yes. Fill in the details. rson Who Was Paid dress		Description and transferred	value of any property	Date payment or transfer was	Amount of payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 4

made

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Debtor 1 Tony Eric Garcia

	transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you	Description and property transfer		Describe any payments rec paid in excha	eived or debts	Date transfer was made
	reison's relationship to you					
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-p No Yes. Fill in the details.		ny property to a	self-settled trust (or similar device of	which you are a
	Name of trust	Description and	value of the prop	erty transferred		Date Transfer was
				•		made
Pai	t 8: List of Certain Financial Accounts, In	nstruments, Safe Deposi	it Boxes, and Sto	orage Units		
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market,			_	-	
	houses, pension funds, cooperatives, asso No Yes. Fill in the details.				o in bainto, orean a	mions, brokerage
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou		•	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	r bankruptcy, an	y safe deposit bo	x or other deposito	ory for securities,
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the con	tents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	r home within 1	year before you fi	led for bankruptcy	?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe the con	tents	Do you still have it?
Pa	t 9: Identify Property You Hold or Control	ol for Someone Else				
23.	Do you hold or control any property that s for someone.	omeone else owns? Incl	lude any propert	y you borrowed fi	rom, are storing for	r, or hold in trust
	No					
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the proj (Number, Street, City, S Code)		Describe the pro	perty	Value
Pai	t 10: Give Details About Environmental In	formation				

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

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Debtor 1 Tony Eric Garcia

-	regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.						
Rep	ort all notices, releases, and proceedings the	at you know about, regardless of when	they occurred.				
24.	Has any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environme	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of	any release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or adn	ninistrative proceeding under any envir	onmental law? Include settlements a	and orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	t 11: Give Details About Your Business or	Connections to Any Business					
27.	Within 4 years before you filed for bankrupt	cy, did you own a business or have any	of the following connections to any	y business?			
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						
	No. None of the above applies. Go to Part 12.						
	☐ Yes. Check all that apply above and fill	in the details below for each business.					
	Business Name	Describe the nature of the business	Employer Identification number				
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security Dates business existed	number or ITIN.			
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.						
	■ No						
	Yes. Fill in the details below.						
	Name	Date Issued					

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

(Number, Street, City, State and ZIP Code)

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Case number (if known) Debtor 1 Tony Eric Garcia

/s/ Tony Eric Garc	i a		
Tony Eric Garcia		Signature of Debtor 2	
Signature of Debtor	1		
Date October 1,	2016	Date	-
Did you attach addition	onal pages to Your Stater	ment of Financial Affairs for Individuals Filing for Bankruptcy	(Official Form 107)?
No			
☐ Yes			
□ Yes	to pay someone who is n	not an attorney to help you fill out bankruptcy forms?	
□ Yes	to pay someone who is n	not an attorney to help you fill out bankruptcy forms?	

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Fill in this inform	nation to identify you	case.				
Debtor 1	Tony Eric Garcia	Middle Name		Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name		
	inkruptcy Court for the:	NORTHERN DIS	TRICT OF ILL			
	initiapitoy Court for the.					
Case number (if known)						☐ Check if this is an amended filing
Official Fo Statemer		on for Indiv	viduals	Filing Under Cl	hapter 7	7 12/15
	ividual filing under cha e claims secured by ye		I out this form	n if:		
■ you have leas You must file this	sed personal property s form with the court ever is earlier, unless t	and the lease has n within 30 days after	you file your	bankruptcy petition or by th ise. You must also send cop		
	eople are filing togethe	er in a joint case, bo	th are equally	responsible for supplying (correct inform	nation. Both debtors must
	and accurate as possi our name and case nu		s needed, atta	ch a separate sheet to this f	orm. On the to	op of any additional pages,
Part 1: List Yo	our Creditors Who Ha	ve Secured Claims				
		Part 1 of Schedule D	: Creditors W	ho Have Claims Secured by	Property (Off	icial Form 106D), fill in the
information be Identify the cre	elow. editor and the property	that is collateral	What do you	ou intend to do with the prop debt?	perty that	Did you claim the property as exempt on Schedule C?
Creditor's Cname:	apital One Auto Fin	ance		er the property. he property and redeem it.		□ No
Description of property	2012 Hyundai Ela miles	ntra 53,000	Reaffirr	ne property and enter into a nation Agreement. The property and [explain]:		Yes
securing debt:				e property and [explain].		
Part 2: List Yo	our Unexpired Person	al Property I eases				
For any unexpire in the informatio	ed personal property lend personal person	ease that you listed al estate leases. Un	expired lease	G: Executory Contracts and es are leases that are still in es not assume it. 11 U.S.C.	effect; the lea	ases (Official Form 106G), fill se period has not yet ended.
Describe your u	nexpired personal pro	perty leases			Wil	I the lease be assumed?
Lessor's name:	-					No
Description of lea	ased				_	INO
Property:						Yes
Lessor's name:						No
Description of lea Property:	ased					Yes
Lessor's name:						No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Debtor 1	Tony Eric Garcia	Case number (if known)
December		
Property:	n of leased	☐ Yes
Lessor's n	ame: n of leased	□ No
Property:	Ti di loadoù	☐ Yes
Lessor's n	ame: n of leased	□ No
Property:	Ti di loadoù	☐ Yes
Lessor's n	ame: n of leased	□ No
Property:	Ti di loadoù	☐ Yes
Lessor's n		□ No
Property:	n of leased	☐ Yes
Part 3:	Sign Below	
	alty of perjury, I declare that I have indicated hat is subject to an unexpired lease.	my intention about any property of my estate that secures a debt and any personal
	ony Eric Garcia	x
	y Eric Garcia ature of Debtor 1	Signature of Debtor 2
Date	October 1, 2016	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation
\$24	45	filing fee
\$7	75	administrative fee
+ \$	15	trustee surcharge
\$33	35	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

- \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-31474 Doc 1 Filed 10/01/16 Entered 10/01/16 14:45:59 Desc Main Document Page 48 of 52

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Tony Eric Garcia		Case No.			
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COMPEN	SATION OF ATTOR	RNEY FOR DI	EBTOR(S)		
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(1) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to		
	For legal services, I have agreed to accept		\$	0.00		
	Prior to the filing of this statement I have received			0.00		
	Balance Due		\$	0.00		
2.	The source of the compensation paid to me was:					
	\blacksquare Debtor \square Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are mem	bers and associates of my law firm.		
	☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name					
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	 a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou 	ment of affairs and plan which is and confirmation hearing, ar educe to market value; exe is as needed; preparation	may be required; and any adjourned hea	rings thereof;		
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.	does not include the following chargeability actions, judi	service: cial lien avoidanc	es, relief from stay actions or		
		CERTIFICATION				
	I certify that the foregoing is a complete statement of any pankruptcy proceeding.	agreement or arrangement for	payment to me for r	epresentation of the debtor(s) in		
(October 1, 2016	/s/ Guillermo F. N	lartinez & Associa	ates		
I	Date	Guillermo F. Mart		S		
		Signature of Attorne Guillermo F. Mart	•	S		
		2457 N. Milwauke				
		Chicago, IL 60647 773-278-7777 Fa	x: 773-278-5429			
		beabt55@yahoo.				
		Name of law firm				

United States Bankruptcy CourtNorthern District of Illinois

		1 to the District of Innions		
In re	Tony Eric Garcia		Case No.	
		Debtor(s)	Chapter 7	7
	VE	ERIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	25
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of credit	tors is true and co	errect to the best of my
	October 1, 2016	/s/ Tony Eric Garcia		

Alliedinterstate P.O.Box 361445 Columbus, OH 43236

American Air/CBNA c/o United Recovery Systems, LP P.O.Box 722910 Houston, TX 77272-2910

Armor Systems Corp c/o Medical-Swedish Covenant Hospital 1700 Kiefer Dr Ste 1 Zion, IL 60099

Armor Systems Corporation c/o Swedish Covenant Hospital 1700 Kiefer Drive Suite 1 Zion, IL 60099-5105

Capital One P.O.Box 6492 Carol Stream, IL 60197-6492

Capital One Auto Finance P.O. Box 60511 Chicago, IL 60634-2512

Discover Fincl SVC LLC c/o Attorney Blitt and Gaines, P.C. 661 Glenn Ave Wheeling, IL 60090

Estate Information Services ,LLCc/o Citi AA World Mastercard P.O.Box 1730 Reynoldsburg, OH 43068-8730

Greensboro Services Center c/o Medstar Laboratory P.O. Box 981502 El Paso, TX 79998-1502

Merchants Credit Guide c/o Medical Midwest Imaging Professionals 223 Jackson Blvd Suite 700 Chicago, IL 60606 midwest Imagining Professionals P.O.Box 3223831 Pittsburgh, PA 15250-7863

MRS BPO,L.L.C. c/o Credit One Bank 1930 Olney Ave. Cherry Hill, NJ 08003

MRS Associates of New Jersey c/o Chase Bank One Card Serv 1930 Olney Ave Cherry Hill, NJ 08003

MRS Associates of New York c/o Chase Bank One Card Serv Cherry Hill, NJ 08003

Presence Health 62392 Collection Center Dr Chicago, IL 60693-0623

Presence Saint Joseph Hospital 62392 Collection Center Dr Chicago, IL 60693-0623

Quest Diagnostics P.O. Box 7306 Hollister, MO 65673-7306

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Receivables management ,Inc c/o Capital One Bank ,N.A. 4850 Street Rd, Suite 300 Feasterville Trevose, PA 19053

Roque Ponton Medical Group 2740 W Foster Ave Suite 313 Chicago, IL 60625-3524

SCH Laboratory Physicians, SC Department 4353 Carol Stream, IL 60122-4353

Syncb/Tjx Co PLCC P.O. Box 965015 Orlando, FL 32896

United Recovery Systems c/o Citibank, N.A. American Airlines P.O. Box 722910 Houston, TX 77272-2910

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